

Bank Commissioner

ROBERT A. FLEURY **Deputy Bank Commissioner**

State of New Hampshire

Banking Department

64B Old Suncook Rd Concord, NH 03301

Telephone: (603) 271-3561 Fax: (603) 271-0750 www.state.nh.us/banking

361-A-REN-SF - RENEWAL FORM FOR SALES FINANCE COMPANIES

Use this form if you currently hold a valid NH sales finance company license that you wish to renew. This form may be used to renew the principal office license and multiple NH branch licenses of a single legal entity. However, only currently licensed locations may be renewed. If you seek to obtain a new principal office license or add new branch office license(s) in New Hampshire, do not use this form, but instead use the appropriate initial application form. The principal office must be licensed wherever it is located, but only branch offices located in New Hampshire need to be licensed.

Renewal Fees: \$350 for the principal office and \$100 for each New Hampshire branch that is being renewed. Fees may be paid in a single check or multiple checks made payable to "The State of New Hampshire".

Sales Finance Company Principal Office (\$350)

FOR OFFICE USE ONLY					
Ck. #					
Amt. \$					
Rec'd by Date					

Entered By Date					
App. Complete Date					
Approved By Date					
Pr. Lic. # Date Mailed					

Enter the current principal office license number:

	umber of NH branche attach an additional sh	s being renewed (\$100 each neet if necessary)		the current NH branc		se number(s):	
Complete all items, sign and notarize the affirmation. Date of this filing:, 200 for renewal of NH sales finance company license(s) for Calendar Year 200							
		<u>NAME AND ID</u>	ENTIFICATION (<u>OF LICENSEE</u>			
1.	Legal name of license	ee:					
	Trade name, if any: _						
2.	Licensee's federal tax	x ID number: Licensee's fiscal year end date					
3.	Address of licensee:						
5.	(Principal Office)	(Street)	(City)	(State)	(Zip)		
	Mailing address, if di	fferent:					
	, 11 41	(Street or PO Box)	(City)	(State)	(Zip)		
4.	Communications:						
		(Tel. no.)	(Fax no	0.)		(Cell no.)	
	(e-mail address)						

Renewal Notice Filing - 361-A-REN - SF Page 2 of 2 Rev. 10/03

Please note that pursuant to NH RSA 361-A:2,XII, all persons licensed by the NH Banking Department must report and amend their filing(s) for any material changes (including but not limited to change in owners, officers, directors, managers including NH branch managers, address, form of organization, contact information, FYE, etc.) to the documents and records on file with the department. The report of an amendment must be filed within 30 days of the event that requires the filing of an amendment.

AFFIRMATION

I subscribe and affirm, under penalty of perjury, that the statements made in this filing have been examined by me and to the best of my knowledge and belief are true, correct and complete, and that I am duly authorized to execute this affirmation. I further affirm that I have reviewed the licensee's records and that all documents on file with the New Hampshire Banking Department, in connection with the licensee's sales finance company license(s), are true and accurate as of this date.

I acknowledge on behalf of the licensee that the licensee's business will be operated in accordance with the New Hampshire Revised Statutes Annotated and Rules of the New Hampshire Banking Department, and further acknowledge that the New Hampshire Banking Department is authorized to conduct examinations of the business affairs and records of the licensee's business at any time with or without notice, and that all books, papers, files, records and related materials, whether electronically stored or otherwise, shall be subject to the Department's examination.

Date _____

	For				
	(Print or type the licensee's name)				
	By(Print or type name of the authorized signatory)				
	Signature				
	Title				
	CORPORATE ACKNOWLEDGMENT				
State or Province of}	COM OMITE NOM DEPOMENT				
County of} ss.					
On this day of, 20 before me	,				
the undersigned officer, personally appeared	(Print name of Notary/JP)				
the undersigned officer, personally appeared(Print name known personally to me to be the(Title of officer)	ne of corporate officer signing this document) of the above named corporation and				
(Title of officer)	<u> </u>				
acknowledged that he or she, as an officer being authorized so to de	o, executed the foregoing instrument				
for the purposes therein contained, by signing the name of the corp	oration by himself or herself as an officer.				
IN WITNESS WHEREOF I have hereunto set my hand and official	l seal.				
	Notary Public/JP Signature				
(CFAL)					
(SEAL)	My Commission Expires(Date)				
	L OR PARTNERSHIP ACKNOWLEDGMENT				
State or Province of}					
County of					
On thisday of, 20, before me,	,				
the undersigned officer, personally appeared(Print name	known to e of individual signing this document)				
me personally and known to me to be the same person whose name					
and acknowledged the execution thereof for the uses and purposes					
In WITNESS WHEREOF I have hereunto set my hand and official					
The warman seed of the seed of					
(CEAL)	Notary Public/JP Signature				
(SEAL)	My Commission Expires(Date)				
	(Date)				